

# Automobile Insurance Questionnaire



## General Information

Insured Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_  
\_\_\_\_\_ Email: \_\_\_\_\_

## Driver Information

① Name: \_\_\_\_\_ Sex: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Marital Status: \_\_\_\_\_  
Relation to Insured: \_\_\_\_\_ Driver's Licence #: \_\_\_\_\_ Driver Training: \_\_\_\_\_  
Dates Licenced: G \_\_\_\_\_ G2 \_\_\_\_\_ G1 \_\_\_\_\_

② Name: \_\_\_\_\_ Sex: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Marital Status: \_\_\_\_\_  
Relation to Insured: \_\_\_\_\_ Driver's Licence #: \_\_\_\_\_ Driver Training: \_\_\_\_\_  
Dates Licenced: G \_\_\_\_\_ G2 \_\_\_\_\_ G1 \_\_\_\_\_

③ Name: \_\_\_\_\_ Sex: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Marital Status: \_\_\_\_\_  
Relation to Insured: \_\_\_\_\_ Driver's Licence #: \_\_\_\_\_ Driver Training: \_\_\_\_\_  
Dates Licenced: G \_\_\_\_\_ G2 \_\_\_\_\_ G1 \_\_\_\_\_

## Vehicle Information

① Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ VIN: \_\_\_\_\_  
Principal Driver: \_\_\_\_\_ Use: \_\_\_\_\_ Number of kms driven to work one way: \_\_\_\_\_ Annual kms driven: \_\_\_\_\_  
Purchase Date (MM/YY): \_\_\_\_\_ Ownership: \_\_\_\_\_ Winter Tires installed (November to April): \_\_\_\_\_

② Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ VIN: \_\_\_\_\_  
Principal Driver: \_\_\_\_\_ Use: \_\_\_\_\_ Number of kms driven to work one way: \_\_\_\_\_ Annual kms driven: \_\_\_\_\_  
Purchase Date (MM/YY): \_\_\_\_\_ Ownership: \_\_\_\_\_ Winter Tires installed (November to April): \_\_\_\_\_

③ Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ VIN: \_\_\_\_\_  
Principal Driver: \_\_\_\_\_ Use: \_\_\_\_\_ Number of kms driven to work one way: \_\_\_\_\_ Annual kms driven: \_\_\_\_\_  
Purchase Date (MM/YY): \_\_\_\_\_ Ownership: \_\_\_\_\_ Winter Tires installed (November to April): \_\_\_\_\_

## Driving History

Present Insurer: \_\_\_\_\_ Expiry Date: \_\_\_\_\_ Years Continuously Insured in Canada? \_\_\_\_\_

Has your Auto Insurance ever been cancelled or refused (i.e. for non-payment or underwriting reasons)? \_\_\_\_\_

For Discount purposes – do you also have Property Insurance? With which Insurance Company? \_\_\_\_\_

Have you or any listed driver been in an AT FAULT accident in the past 10 years?  
\_\_\_\_\_

Have you or any listed driver had a NOT AT FAULT accident or claim in the past 10 years?  
\_\_\_\_\_

Have you or any listed driver had any driving convictions (speeding, seatbelt, etc.) in the past 3 years?  
\_\_\_\_\_

Have you or any listed driver had any licence suspensions in the past 6 years?  
\_\_\_\_\_

Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_